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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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Duane Morris I 505 9th Street, N Suite 1000	.W.	2009	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
Washington, DC	20004					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/531,041 10/19/2005		Joseph P, Kennedy Jr	GRA26 011 5052		5052		
,		Y LOCATION SYSTEM	•	R INTERFACE WI	TH FREQUENCY STOPPI	NG	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/23/2009	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
ВНАТТАСН	ARYA, SAM	2617	455-456100				
CFR 1.363). Change of corresp Address form PTO/SE "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required. ASSIGNEE NAME A	ence address or indication ondence address (or Cha 3/122) attached. ication (or "Fee Address 2 or more recent) attach	nge of Correspondence Indication form led. Use of a Customer A TO BE PRINTED ON	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Andrew LLC Hickory, NC							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government							
4a. The following fee(s) are submitted:			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-1679 (enclose an extra copy of this form).				
5. Change in Entity Sta a. Applicant claim	s SMALL ENTITY stat	us. See 37 CFR 1.27.			LL ENTITY status. See 37 (
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req records of the United Sta	uired) will not be accepte ates Patent and Trademar	ed from anyone other than t k Office.	he applicant; a regi	stered attorney or agent; or	the assignee or other party in	
Authorized Signature /mcc/				DateO	ctober 21, 2009	<u> </u>	
Typed or printed nam	e Mark C.	Comtois			Jo. 46,285		
Alexandria, virginia 223	113~1430.				he public which is to file (an minutes to complete, includ mments on the amount of t Trademark Office, U.S. De S. SEND TO: Commissione displays a valid OMB contro	nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	